

REQUEST FOR PERMISSION TO ENGAGE IN OFF-DUTY EMPLOYMENT

For use of this form, see Fort Knox Policy Memo No. 26-06, 24 Feb 06, subj: Off-Duty Employment

RANK/GRADE AND NAME: _____

UNIT: _____

DUTY POSITION: _____ NORMAL DUTY HOURS: _____

PROPOSED OUTSIDE _____

TELEPHONE NUMBER OF PROPOSED _____

PROPOSED PLACE OF _____

PROPOSED DUTIES OF EMPLOYMENT: _____

HOURS/SCHEDULE OF PROPOSED _____

ARE YOU REQUIRED TO FILE A FINANCIAL DISCLOSURE REPORT (OGE _____ YES _____ NO _____)

I was counseled by my supervisor, _____ on the _____ day of _____, 20____ concerning my duty requirements and outside employment. I understand that my official duty requirements take priority, that I can be disciplined if I fail in my official duty requirements because of interference of my off-duty employment, and that I can be ordered to cease outside employment if such interference occurs. I further understand that I am required to schedule a minimum 6-hour rest period (not including travel time to/from work/home/duty) between my off-duty employment and the start of my official duties. If my off-duty employment schedule changes, I understand that I must seek advance approval using the same procedures. Finally, I agree to cooperate fully and willfully with my chain of command if they wish to verify my work schedule, and to allow them to review compensation documentation or other off-duty employment records. Failure to cooperate fully in verification procedures may, by itself, result in an order to cease or curtail off-duty employment, as well as other adverse disciplinary or administrative actions.

SIGNATURE OF INDIVIDUAL SEEKING OUTSIDE EMPLOYMENT _____

SIGNATURE OF SUPERVISOR _____

COMMENTS OF SUPERVISOR: _____

I have personally reviewed this report. I _____ do _____ do not believe that this individual's off-duty employment will detract from unit readiness or pose a security or a safety risk. Accordingly, I _____ do _____ do not prohibit this individual from performing the proposed outside employment.

TYPED NAME AND GRADE OF APPROVING OFFICIAL _____

SIGNATURE OF APPROVING OFFICIAL _____